

(12) INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(19) World Intellectual Property Organization
International Bureau



(43) International Publication Date
31 October 2002 (31.10.2002)

PCT

(10) International Publication Number
WO 02/086091 A2

(51) International Patent Classification⁷: **C12N**
(21) International Application Number: PCT/US02/13164
(22) International Filing Date: 25 April 2002 (25.04.2002)
(25) Filing Language: English
(26) Publication Language: English
(30) Priority Data:
60/286,314 25 April 2001 (25.04.2001) US
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(81) Designated States (*national*): AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW.

(84) Designated States (*regional*): ARIPO patent (GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG).

Published:

— *without international search report and to be republished upon receipt of that report*

For two-letter codes and other abbreviations, refer to the "Guidance Notes on Codes and Abbreviations" appearing at the beginning of each regular issue of the PCT Gazette.

(54) Title: METHOD TO TREAT HEMOPHILIA BY HEPATIC GENE TRANSFER OF FACTOR VIII/IX WITH VESICLE VECTOR

(57) Abstract: Hemophilia is one of the most common genetic disorders. Standard therapies include transfusions with plasma products to provide clotting factors. The invention is a non-viral vesicle vector and method for the treatment of hemophilia. The vesicle vector contains the hepatitis B envelope protein to target the vesicle to the liver for delivery of an expression construct containing the coding sequence for factor VIII or IX driven by an appropriate promoter of factor VIII or IX protein.

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**METHOD TO TREAT HEMOPHILIA BY HEPATIC GENE TRANSFER
OF FACTOR VIII/IX WITH VESICLE VECTOR**

CROSS-REFERENCES TO RELATED APPLICATIONS

5 This application claims the benefit of priority of United States provisional application Serial Number 60/286,314 filed April 25, 2001 which is incorporated herein by reference in its entirety.

SEQUENCE LISTING

10 A sequence listing is submitted herewith under 35 C.F.R. §1.821 and is incorporated herein by reference.

BACKGROUND OF THE INVENTION

Hemophilia is one of the most common genetic disorders.

15 Hemophilia A caused by deficiency of Factor VIII occurs in about 1 in 5000 male births, while hemophilia B caused by a defect in Factor IX is around 1 in 30,000 male births. The prevalence is very general in all populations studied. Hemophilia has long been treated with clotting factor concentrates, but the aim of this therapy is to control bleeding and requires
20 lifelong repetitive intravenous infusions. Because of the increasing awareness of the risk of plasma derived products, the importance of the development of new and effective treatments is increased.

 Gene therapy approaches have been developed for the treatment of hemophilia. Hemophilia is a particularly attractive model for developing a
25 gene transfer approach for the treatment of disease. The proteins are well characterized, the genes are cloned and available, and there are large and small animal models of the disease. Moreover, there is no essential requirement for tissue specific delivery of the gene product and as protein function is regulated by activation of the protein; therefore, expression
30 levels of the protein need not be tightly regulated. Additionally, only a low level of protein expression is required for phenotypic correction of the disease. The major hurdle of treatment of hemophilia by gene therapy is

that the expression of the gene product must be sustained throughout the life of the individual; therefore, effective therapy would likely require re-administration of the gene therapy vector.

Clinical trials for the treatment of hemophilia using retroviral and adeno-associated viral (AAV) vectors are ongoing. Adenoviral and lentiviral vectors have been used experimentally. However, the problem with all of these viral vectors is that they have a limited capacity for nucleic acid and have been shown to elicit an immune response. The use of DNA or RNA with or without synthetic liposomes results in low efficiency gene transfer. Non-viral methods achieve only short term, non-targeted gene expression.

A novel, liver-specific vesicle vector expressing modified surface proteins of the hepatitis B virus was recently described by Yamada et al (2001a). The vesicles containing the hepatitis B membrane proteins are generated by the methods well known to those skilled in the art (Kuroda et al, 1992, and Yamada et al., 2001b, incorporated herein by reference). Briefly, a modified hepatitis B envelope (env) L protein, containing the pre-S1 + pre-S2 + S peptides, can be effectively generated in yeast by fusing the coding sequence for the chicken lysozyme signal sequence in frame to the beginning of the coding sequence for the modified env L protein (SEQ ID 1). The signal sequence directs the insertion of the proteins into the endoplasmic reticulum during translation. Protein rich vesicles bud from the endoplasmic reticulum and accumulate in the cytoplasm of the yeast cell. The vesicles are composed of lipid bilayers derived from the ER and the modified env L proteins as the major protein component. Particles formed by this method are very stable and can be easily purified through repetitive cesium chloride and sucrose gradients by methods well known to those skilled in the art.

Plasmid DNA can be incorporated into the env L containing particles by electroporation (Yamada et al. 2001a). Such DNA containing particles were demonstrated to facilitate entry of the DNA specifically into liver cells both in culture and upon systemic administration to nude mice in which human

hepatoma cells were transplanted. Yamada et al. (2001a) suggested that such a vesicle vector could be used for tissue specific delivery of nucleic acid and other compounds to the liver.

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SUMMARY OF THE INVENTION

The invention is a non-viral vesicle vector for the treatment of hemophilia comprising a lipid bilayer containing a modified hepatitis B env L protein such that recognition of the S-peptide by the immune system is attenuated or abrogated, but the liver targeting signals are still exposed on the surface of the vesicle, and an expression construct for the expression of Factor VIII or IX for the treatment of hemophilia A or B, respectively. The expression construct may be single or double stranded DNA containing any of a number of promoters including, but not limited to general (e.g. cytomegalovirus, Rous sarcoma virus) and tissue specific (e.g. alpha fetoprotein, globulin, albumin, α 1-microglobulin) promoters. The construct may contain additional regulatory elements including, but not limited to enhancers, introns, poly A sequences, RNA targeting sequences. Sequences to promote replication of the plasmid including SV40 origin of replication can be included. Inverted terminal repeat (ITR) sequences from AAV can be included in the construct to promote expression cassette stability or to enhance integration into the host DNA with the AAV Rep protein. In lieu of ITR sequences, eukaryotic DNA transposon/transposases systems can be used to promote integration.

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The invention is a method for the treatment of hemophilia by administration of the non-viral vesicle vector of the invention. The vesicle vector containing the nucleic acid construct with the appropriate coding sequence is administered intravenously or intraarterially. The individual is monitored for expression of the gene product of interest by detection of the protein or mRNA or by phenotypic recovery.

DETAILED DESCRIPTION AND PREFERRED EMBODIMENT

Hemophilia is one of the most common genetic disorders and is a result of a mutation or deletion in any of the clotting factors, most commonly Factor VIII or IX. Treatment requires the lifelong replacement of clotting factors which requires repetitive intravenous infusions and exposes patients to the dangers associated with plasma derived products.

Hemophilia is amenable to treatment with gene therapy for a number of reasons. First, the genes involved are cloned and available. Second, the proteins are well characterized and their activation is regulated by cleavage of the protein rather than at the transcriptional or translational level; therefore, the expression level does not need to be tightly regulated. Third, low levels of protein expression have been demonstrated to be sufficient for phenotypic recovery. Fourth, although the liver is the physiological site of production of most of the Factor VIII and IX, the site of production of the protein within the body is relatively unimportant. Fifth, a number of animal models are available for analysis of various therapies. However, to date no effective gene transfer vectors or methods for the treatment of hemophilia have been developed.

The invention is a vesicle vector for the treatment of hemophilia comprising a natural lipid vesicle preferably produced in yeast or insect cells, such as Sf9 cells, containing modified hepatitis B env L protein integrated into the membrane and an expression construct inside the vesicle for the expression of Factor VIII or IX. The vesicles are prepared by the vaccine production method of Kuroda (1992) further refined by Yamada (2001b). Briefly, the hepatitis B env L protein is composed of three regions: the 108- or 119-residue pre-S1 region involved in the direct interaction with hepatocytes, the 55-residue pre-S2 region associated with the polymerized albumin-mediated interaction and the major 226-residue S-protein region. Attempts to produce L protein in various eukaryotic cells had been unsuccessful, probably due to the presence of the N-terminus of

the pre-S1 peptide. The coding sequence of the N-terminus of the L protein was replaced by a chicken lysosome signal sequence to direct the translocation of the N-terminus through the endoplasmic reticulum (ER). The chimeric sequence was inserted into a yeast (*S. cerevisiae*) expression vector and inserted into yeast using a standard transformation protocol. The chimeric L-protein was produced in abundance, up to 42% of the total yeast protein, and was properly inserted into the membrane. Vesicles budded off of the ER to form 23 nm spherical and filamentous particles containing the protein in the membrane of the vesicles. The yeast cells were disrupted with glass beads to release the vesicles. Vesicles were purified by serial rounds of discontinuous cesium and sucrose gradients. Production and purification of vesicles from insect cells would be performed in a similar method. A crude membrane fraction could be prepared as with the yeast cells, by homogenization and differential centrifugation. The fraction can be loaded onto cesium or sucrose gradients as with the yeast extract for purification of vesicles. The methods are amenable to inexpensive, large scale production of vesicles which is necessary for gene transfer. Vesicles are stable for long term storage at a low temperature but are unstable upon repeated freeze-thaw cycles.

The vesicle vectors can be used for the delivery of any nucleic acid construct, single- or double-stranded DNA or RNA, or gene product to the liver. In a preferred embodiment of the invention, the nucleic acid is a double stranded DNA plasmid. The construct minimally contains the coding sequence for human Factor VIII (SEQ ID 2) or IX (SEQ ID 3) for the treatment of hemophilia A or B respectively and a promoter to allow for transcription of the hemophilia gene. The construct may optionally contain additional regulatory and enhancer elements to modulate gene expression, intron and poly-A sequences to promote RNA processing and gene expression, RNA targeting sequences, AAV-ITR or eukaryotic transposon

sequences to promote stabilization of expression cassettes and integration into the host genome and viral origin of replication sequences to promote amplification of the plasmid in host cells. Such sequences are well known to those skilled in the art. The number of elements that can be inserted
5 into the nucleic acid construct as the size is not limited by the requirements of a viral genome as is the case with many gene transfer protocols.

Any of a number of promoter sequences are known to be functional in liver cells. These include both non-tissue specific promoters such as CMV, RSV, ubiquitin, chicken β -actin and elongation factor (EF)-1 α ; and
10 tissue specific promoters such as alpha-fetoprotein, globulin, α 1-microglobulin and albumin.

AAV-ITR sequences may be incorporated into the construct flanking all of the coding and regulatory sequences, other than any origins of replication. The AAV-ITR sequences have been demonstrated to increase
15 the stability of transferred constructs in gene therapy protocols.

Alternatively, the AAV-ITR sequences may enhance integration into the human genome at a specific site with the cooperation of the AAV-Rep protein, which may be supplied by incorporation into the vesicles with the nucleic acid construct or by expression cassettes packaged into the same
20 vesicle.

Eukaryotic transposon sequences can be incorporated into the construct flanking all of the coding sequences and regulatory elements, similar to the AAV-ITR sequences. Transposase to promote integration may be expressed from the same expression cassette or from a separate
25 expression cassette packaged into the same vesicle.

Special considerations may be taken when expressing Factor VIII. Studies have demonstrated that human Factor VIII contains a sequence (nucleotides 1741 to 1771 in SEQ ID 2) that decreases heterologous expression of proteins (Fallaux et al., 1996). The sequence is AT-rich and
30 has been demonstrated to bind a nuclear factor and repress expression of

a reporter construct in cells. Deletion or random mutation of the sequence results in a non-functional Factor VIII. However, silent mutations that result in no change in the amino acid sequence of the gene product can be introduced into the coding sequence by methods well known to those skilled in the art to enhance expression of Factor VIII.

In a preferred embodiment, the nucleic acid construct of the invention is introduced into the vesicles by electroporation. The nucleic acid construct is mixed thoroughly with the vesicles, brought to a final volume in water and transferred to an electroporation cuvette. Voltage and resistance vary widely depending on the size (gap length) of the cuvette and the volume of material in the cuvette. Such parameters can be readily modified by methods well known to those skilled in the art to result in maximum transfer of nucleic acid into vesicles with minimum destruction of vesicles.

Alternatively the nucleic acid may be introduced into the vesicle by fusion with nucleic acid containing liposomes by methods well known to those skilled in the art (Dzau et al, 1996). The construct of the invention is encapsulated into liposomes prepared by vortexing. Liposomes may be composed of known phospholipids and membrane components (e.g. phosphatidyl-choline, cholesterol) or of commercially available proprietary mixtures of membrane components (e.g. Lipofectamine from Gibco-BRL). Nucleic acid encapsulated in liposomes will fuse with the yeast or insect cell derived vesicles upon incubation at 37°C for 10-30 minutes.

Alternatively, factor VIII or IX protein may be incorporated into the vesicle vector of the invention. Factor VIII (SEQ ID 4) and IX (SEQ ID 5) protein may be produced using any of a number of methods well known to those skilled in the art. A solution containing a high concentration of protein may be mixed with purified vesicles and subjected to osmotic shock or sonication to promote incorporation of the protein into the vesicles. Protein may also be incorporated into artificial membranes by

vortexing or sonication. The artificial membranes containing the protein can be fused with the hepatitis B vesicles.

The nucleic acid or protein containing non-viral vesicle vectors of the invention are administered to the individual intravenously or intraarterially. To increase delivery, the vesicle vector can be administered directly into the hepatic or portal artery. The individual is monitored on regular intervals for the presence of factor VIII or IX or for phenotypic recovery. The amount of the non-viral vesicle to be administered would depend on the strength of the promoter, integration sequences, number of plasmids per vesicle and a number of other considerations well known to those skilled in the art. As methods for monitoring the state of health of individuals are well known, an effective dose can be readily determined.

Although an exemplary embodiment of the invention has been described above by way of example only, it will be understood by those skilled in the field that modifications may be made to the disclosed embodiment without departing from the scope of the invention, which is defined by the appended claims.

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Kuroda, S. et al (1992) Hepatitis B virus envelope L protein particles. *J. Biol. Chem.* 267:1953-1961.

Yamada, T. et al (2001a) A new pinpoint gene delivery system using genetically engineered hepatitis B virus envelope L particles. *Molecular Biology and New Therapeutic Strategies: Cancer Research in the 21st*

Century. 5th Joint Conference of the American Association for Cancer Research and the Japanese Cancer Association. Hawaii, USA, February 12-16, 2001.

5 Yamada. T. et al (2001b) Physiochemical and immunological characterization of hepatitis B virus envelope particles exclusively consisting of the entire L (pre-S1 + pre- S2 + S) protein. *Vaccine* 19:3154-3163.

WE CLAIM:

10.

CLAIMS

- 2 1. A non-viral vesicle vector comprising:
a vesicular membrane with hepatitis B envelope (env) protein
4 exposed on the vesicle surface and
a nucleic acid expression construct comprising a complete factor VIII
6 or factor IX coding sequence and a promoter sequence functional in liver
cells.
- 8 2. The vesicle vector of claim 1, wherein the env protein contains
10 mutations to reduce antigenicity.
- 12 3. The vesicle vector of claim 1, wherein the expression construct is
DNA.
- 14 4. The vesicle vector of claim 1, wherein the expression construct is
16 double stranded plasmid DNA.
- 18 5. The vesicle vector of claim 1, wherein the expression construct is
RNA.
- 20 6. The vesicle vector of claim 1, wherein the promoter is a non-
22 tissue specific promoter.
- 24 7. The vesicle vector of claim 6, wherein the non-tissue specific
promoter is selected from the group consisting of cytomegalovirus
26 promoter, Rous sarcoma virus promoter, ubiquitin promoter, chicken β -
actin promoter and elongation factor 1 α promoter.
- 28 8. The vesicle vector of claim 1, wherein the promoter is a liver
30 specific promoter.

32 9. The vesicle vector of claim 8, wherein the liver specific promoter
is selected from the group consisting of alpha-fetoprotein promoter,
34 globulin promoter, α 1-microglobulin and albumin.

36 10. The vesicle vector of claim 1, wherein the expression construct
comprises inverted terminal repeat sequences from adeno-associated virus
38 (AAV-ITR).

40 11. The vesicle vector of claim 1, wherein the expression construct
comprises eukaryotic transposon and transposase sequences.

42 12. The vesicle vector of claim 1, wherein the expression construct
44 comprises the coding sequence of factor VIII.

46 13. The vesicle vector of claim 12, wherein the factor VIII comprises
silent mutations to enhance expression.

48 14. The vesicle vector of claim 1, wherein the expression construct
50 comprises the coding sequence of factor IX.

52 15. A non-viral vesicle vector comprising:
a vesicular membrane with hepatitis B envelope (env) protein
54 exposed on the vesicle surface and
a protein comprising a complete factor VIII or factor IX.

56 16. The vesicle vector of claim 15, wherein the env protein contains
58 mutations to reduce antigenicity.

60 17. A method for treatment of hemophilia comprising:

administration into circulation of an individual with hemophilia a
62 non-viral vesicle vector comprising a vesicular membrane with hepatitis B
env protein exposed on the vesicle surface and
64 a nucleic acid expression construct comprising a complete factor VIII
or IX coding sequence and a promoter sequence functional in liver cells
66 and
monitoring the individual for amelioration of disease.

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18. The method of claim 17, wherein administration into circulation
70 comprises intravenous administration.

19. The method of claim 17, wherein administration into circulation
comprises administration into a hepatic or portal artery

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SEQUENCE LISTING

<110> Chien, Kenneth R
Hoshijima, Masahiko

<120> Method to treat hemophilia by hepatic gene transfer of Factor
VIII/IX with vesicle vector

<130> 6627-PA1170

<150> 60/286,314

<151> 2001-04-25

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<170> PatentIn version 3.1

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Gly Ala Leu Leu Val Cys Arg Glu Gly Ser Leu Ala Lys Glu Lys Thr
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Gln Thr Leu His Lys Phe Ile Leu Leu Phe Ala Val Phe Asp Glu Gly
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Tyr Ile Leu Ser Ile Gly Ala Gln Thr Asp Phe Leu Ser Val Phe Phe
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Ser	Phe	Pro	Ser	Ile	Arg	Pro	Ile	Tyr	Leu	Thr	Arg	Val	Leu	Phe
1415						1420					1425			
Gln	Asp	Asn	Ser	Ser	His	Leu	Pro	Ala	Ala	Ser	Tyr	Arg	Lys	Lys
1430						1435					1440			
Asp	Ser	Gly	Val	Gln	Glu	Ser	Ser	His	Phe	Leu	Gln	Gly	Ala	Lys
1445						1450					1455			
Lys	Asn	Asn	Leu	Ser	Leu	Ala	Ile	Leu	Thr	Leu	Glu	Met	Thr	Gly
1460						1465					1470			
Asp	Gln	Arg	Glu	Val	Gly	Ser	Leu	Gly	Thr	Ser	Ala	Thr	Asn	Ser
1475						1480					1485			
Val	Thr	Tyr	Lys	Lys	Val	Glu	Asn	Thr	Val	Leu	Pro	Lys	Pro	Asp
1490						1495					1500			
Leu	Pro	Lys	Thr	Ser	Gly	Lys	Val	Glu	Leu	Leu	Pro	Lys	Val	His
1505						1510					1515			

Ile Tyr	Gln Lys Asp Leu Phe	Pro Thr Glu Thr Ser	Asn Gly Ser
1520	1525	1530	
Pro Gly	His Leu Asp Leu Val	Glu Gly Ser Leu Leu	Gln Gly Thr
1535	1540	1545	
Glu Gly	Ala Ile Lys Trp Asn	Glu Ala Asn Arg Pro	Gly Lys Val
1550	1555	1560	
Pro Phe	Leu Arg Val Ala Thr	Glu Ser Ser Ala Lys	Thr Pro Ser
1565	1570	1575	
Lys Leu	Leu Asp Pro Leu Ala	Trp Asp Asn His Tyr	Gly Thr Gln
1580	1585	1590	
Ile Pro	Lys Glu Glu Trp Lys	Ser Gln Glu Lys Ser	Pro Glu Lys
1595	1600	1605	
Thr Ala	Phe Lys Lys Lys Asp	Thr Ile Leu Ser Leu	Asn Ala Cys
1610	1615	1620	
Glu Ser	Asn His Ala Ile Ala	Ala Ile Asn Glu Gly	Gln Asn Lys
1625	1630	1635	
Pro Glu	Ile Glu Val Thr Trp	Ala Lys Gln Gly Arg	Thr Glu Arg
1640	1645	1650	
Leu Cys	Ser Gln Asn Pro Pro	Val Leu Lys Arg His	Gln Arg Glu
1655	1660	1665	
Ile Thr	Arg Thr Thr Leu Gln	Ser Asp Gln Glu Glu	Ile Asp Tyr
1670	1675	1680	
Asp Asp	Thr Ile Ser Val Glu	Met Lys Lys Glu Asp	Phe Asp Ile
1685	1690	1695	
Tyr Asp	Glu Asp Glu Asn Gln	Ser Pro Arg Ser Phe	Gln Lys Lys
1700	1705	1710	
Thr Arg	His Tyr Phe Ile Ala	Ala Val Glu Arg Leu	Trp Asp Tyr
1715	1720	1725	
Gly Met	Ser Ser Ser Pro His	Val Leu Arg Asn Arg	Ala Gln Ser

1730		1735		1740
Gly Ser Val Pro Gln Phe Lys	Lys Val Val Phe Gln	Glu Phe Thr		
1745	1750	1755		
Asp Gly Ser Phe Thr Gln Pro	Leu Tyr Arg Gly Glu	Leu Asn Glu		
1760	1765	1770		
His Leu Gly Leu Leu Gly Pro	Tyr Ile Arg Ala Glu	Val Glu Asp		
1775	1780	1785		
Asn Ile Met Val Thr Phe Arg	Asn Gln Ala Ser Arg	Pro Tyr Ser		
1790	1795	1800		
Phe Tyr Ser Ser Leu Ile Ser	Tyr Glu Glu Asp Gln	Arg Gln Gly		
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Ala Glu Pro Arg Lys Asn Phe	Val Lys Pro Asn Glu	Thr Lys Thr		
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Tyr Phe Trp Lys Val Gln His	His Met Ala Pro Thr	Lys Asp Glu		
1835	1840	1845		
Phe Asp Cys Lys Ala Trp Ala	Tyr Phe Ser Asp Val	Asp Leu Glu		
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Lys Asp Val His Ser Gly Leu	Ile Gly Pro Leu Leu	Val Cys His		
1865	1870	1875		
Thr Asn Thr Leu Asn Pro Ala	His Gly Arg Gln Val	Thr Val Gln		
1880	1885	1890		
Glu Phe Ala Leu Phe Phe Thr	Ile Phe Asp Glu Thr	Lys Ser Trp		
1895	1900	1905		
Tyr Phe Thr Glu Asn Met Glu	Arg Asn Cys Arg Ala	Pro Cys Asn		
1910	1915	1920		
Ile Gln Met Glu Asp Pro Thr	Phe Lys Glu Asn Tyr	Arg Phe His		
1925	1930	1935		
Ala Ile Asn Gly Tyr Ile Met	Asp Thr Leu Pro Gly	Leu Val Met		
1940	1945	1950		

Ala Gln	Asp Gln Arg	Ile Arg	Trp Tyr Leu Leu	Ser	Met Gly Ser
1955		1960		1965	
Asn Glu	Asn Ile His Ser	Ile	His Phe Ser Gly	His	Val Phe Thr
1970		1975		1980	
Val Arg	Lys Lys Glu Glu	Tyr	Lys Met Ala Leu	Tyr	Asn Leu Tyr
1985		1990		1995	
Pro Gly	Val Phe Glu Thr	Val	Glu Met Leu Pro	Ser	Lys Ala Gly
2000		2005		2010	
Ile Trp	Arg Val Glu Cys	Leu	Ile Gly Glu His	Leu	His Ala Gly
2015		2020		2025	
Met Ser	Thr Leu Phe Leu	Val	Tyr Ser Asn Lys	Cys	Gln Thr Pro
2030		2035		2040	
Leu Gly	Met Ala Ser Gly	His	Ile Arg Asp Phe	Gln	Ile Thr Ala
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Ser Gly	Gln Tyr Gly Gln	Trp	Ala Pro Lys Leu	Ala	Arg Leu His
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Tyr Ser	Gly Ser Ile Asn	Ala	Trp Ser Thr Lys	Glu	Pro Phe Ser
2075		2080		2085	
Trp Ile	Lys Val Asp Leu	Leu	Ala Pro Met Ile	Ile	His Gly Ile
2090		2095		2100	
Lys Thr	Gln Gly Ala Arg	Gln	Lys Phe Ser Ser	Leu	Tyr Ile Ser
2105		2110		2115	
Gln Phe	Ile Ile Met Tyr	Ser	Leu Asp Gly Lys	Lys	Trp Gln Thr
2120		2125		2130	
Tyr Arg	Gly Asn Ser Thr	Gly	Thr Leu Met Val	Phe	Phe Gly Asn
2135		2140		2145	
Val Asp	Ser Ser Gly Ile	Lys	His Asn Ile Phe	Asn	Pro Pro Ile
2150		2155		2160	
Ile Ala	Arg Tyr Ile Arg	Leu	His Pro Thr His	Tyr	Ser Ile Arg
2165		2170		2175	

Ser Thr Leu Arg Met Glu Leu Met Gly Cys Asp Leu Asn Ser Cys
 2180 2185 2190

Ser Met Pro Leu Gly Met Glu Ser Lys Ala Ile Ser Asp Ala Gln
 2195 2200 2205

Ile Thr Ala Ser Ser Tyr Phe Thr Asn Met Phe Ala Thr Trp Ser
 2210 2215 2220

Pro Ser Lys Ala Arg Leu His Leu Gln Gly Arg Ser Asn Ala Trp
 2225 2230 2235

Arg Pro Gln Val Asn Asn Pro Lys Glu Trp Leu Gln Val Asp Phe
 2240 2245 2250

Gln Lys Thr Met Lys Val Thr Gly Val Thr Thr Gln Gly Val Lys
 2255 2260 2265

Ser Leu Leu Thr Ser Met Tyr Val Lys Glu Phe Leu Ile Ser Ser
 2270 2275 2280

Ser Gln Asp Gly His Gln Trp Thr Leu Phe Phe Gln Asn Gly Lys
 2285 2290 2295

Val Lys Val Phe Gln Gly Asn Gln Asp Ser Phe Thr Pro Val Val
 2300 2305 2310

Asn Ser Leu Asp Pro Pro Leu Leu Thr Arg Tyr Leu Arg Ile His
 2315 2320 2325

Pro Gln Ser Trp Val His Gln Ile Ala Leu Arg Met Glu Val Leu
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Gly Cys Glu Ala Gln Asp Leu Tyr
 2345 2350

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 <212> PRT
 <213> Homo sapiens

<400> 5

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Ile Cys Leu Leu Gly Tyr Leu Leu Ser Ala Glu Cys Thr Val Phe Leu
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Asp His Glu Asn Ala Asn Lys Ile Leu Asn Arg Pro Lys Arg Tyr Asn
 35 40 45

Ser Gly Lys Leu Glu Glu Phe Val Gln Gly Asn Leu Glu Arg Glu Cys
 50 55 60

Met Glu Glu Lys Cys Ser Phe Glu Glu Ala Arg Glu Val Phe Glu Asn
 65 70 75 80

Thr Glu Arg Thr Thr Glu Phe Trp Lys Gln Tyr Val Asp Gly Asp Gln
 85 90 95

Cys Glu Ser Asn Pro Cys Leu Asn Gly Gly Ser Cys Lys Asp Asp Ile
 100 105 110

Asn Ser Tyr Glu Cys Trp Cys Pro Phe Gly Phe Glu Gly Lys Asn Cys
 115 120 125

Glu Leu Asp Val Thr Cys Asn Ile Lys Asn Gly Arg Cys Glu Gln Phe
 130 135 140

Cys Lys Asn Ser Ala Asp Asn Lys Val Val Cys Ser Cys Thr Glu Gly
 145 150 155 160

Tyr Arg Leu Ala Glu Asn Gln Lys Ser Cys Glu Pro Ala Val Pro Phe
 165 170 175

Pro Cys Gly Arg Val Ser Val Ser Gln Thr Ser Lys Leu Thr Arg Ala
 180 185 190

Glu Thr Val Phe Pro Asp Val Asp Tyr Val Asn Ser Thr Glu Ala Glu
 195 200 205

Thr Ile Leu Asp Asn Ile Thr Gln Ser Thr Gln Ser Phe Asn Asp Phe
 210 215 220

Thr Arg Val Val Gly Gly Glu Asp Ala Lys Pro Gly Gln Phe Pro Trp
 225 230 235 240

Gln Val Val Leu Asn Gly Lys Val Asp Ala Phe Cys Gly Gly Ser Ile

245	250	255
Val Asn Glu Lys Trp Ile Val Thr Ala Ala His Cys Val Glu Thr Gly		
260	265	270
Val Lys Ile Thr Val Val Ala Gly Glu His Asn Ile Glu Glu Thr Glu		
275	280	285
His Thr Glu Gln Lys Arg Asn Val Ile Arg Ile Ile Pro His His Asn		
290	295	300
Tyr Asn Ala Ala Ile Asn Lys Tyr Asn His Asp Ile Ala Leu Leu Glu		
305	310	315
Leu Asp Glu Pro Leu Val Leu Asn Ser Tyr Val Thr Pro Ile Cys Ile		
325	330	335
Ala Asp Lys Glu Tyr Thr Asn Ile Phe Leu Lys Phe Gly Ser Gly Tyr		
340	345	350
Val Ser Gly Trp Gly Arg Val Phe His Lys Gly Arg Ser Ala Leu Val		
355	360	365
Leu Gln Tyr Leu Arg Val Pro Leu Val Asp Arg Ala Thr Cys Leu Arg		
370	375	380
Ser Thr Lys Phe Thr Ile Tyr Asn Asn Met Phe Cys Ala Gly Phe His		
385	390	395
Glu Gly Gly Arg Asp Ser Cys Gln Gly Asp Ser Gly Gly Pro His Val		
405	410	415
Thr Glu Val Glu Gly Thr Ser Phe Leu Thr Gly Ile Ile Ser Trp Gly		
420	425	430
Glu Glu Cys Ala Met Lys Gly Lys Tyr Gly Ile Tyr Thr Lys Val Ser		
435	440	445
Arg Tyr Val Asn Trp Ile Lys Glu Lys Thr Lys Leu Thr		
450	455	460

(12) INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(19) World Intellectual Property Organization
International Bureau



(43) International Publication Date
31 October 2002 (31.10.2002)

PCT

(10) International Publication Number
WO 02/086091 A3

(51) International Patent Classification⁷: **A01N 63/00**,
A61K 48/00, 9/127, 38/00, C12N 15/00, C07H 21/02,
C07K 1/00

(21) International Application Number: PCT/US02/13164

(22) International Filing Date: 25 April 2002 (25.04.2002)

(25) Filing Language: English

(26) Publication Language: English

(30) Priority Data:
60/286,314 25 April 2001 (25.04.2001) US

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(81) Designated States (*national*): AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW.

(84) Designated States (*regional*): ARIPO patent (GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG).

Published:

- with international search report
- before the expiration of the time limit for amending the claims and to be republished in the event of receipt of amendments

(88) Date of publication of the international search report:
27 February 2003

For two-letter codes and other abbreviations, refer to the "Guidance Notes on Codes and Abbreviations" appearing at the beginning of each regular issue of the PCT Gazette.

(54) Title: METHOD TO TREAT HEMOPHILIA BY HEPATIC GENE TRANSFER OF FACTOR VIII/IX WITH VESICLE VECTOR

(57) Abstract: Hemophilia is one of the most common genetic disorders. Standard therapies include transfusions with plasma products to provide clotting factors. The invention is a non-viral vesicle vector and method for the treatment of hemophilia. The vesicle vector contains the hepatitis B envelope protein to target the vesicle to the liver for delivery of an expression construct containing the coding sequence for factor VIII or IX driven by an appropriate promoter of factor VIII or IX protein.

WO 02/086091 A3

INTERNATIONAL SEARCH REPORT

International application No.

PCT/US02/13164

A. CLASSIFICATION OF SUBJECT MATTER

IPC(7) : A01N 63/00; A61K 48/00, 9/127, 38/00; C12N 15/00; C07H 21/02; C07K 1/00

US CL : 424/93.1+, 93.2, 450; 435/320.1; 514/12; 536/23.1; 530/350+

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)

U.S. : 424/93.1+, 93.2, 450; 435/320.1; 514/12; 536/23.1; 530/350+

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)
EAST, STN(MEDLINE, CAPLUS, EMBASE, BIOSIS)

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category *	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	US 5,985,655 A (ANDERSON et al) 16 November 1999 (16.11.1999), column 1, lines 9-63, column 6, lines 57-65, column 7, lines 1-11, column 28, lines 43-47 and column 29, lines 13-16.	1, 3-7, 12-14
---		2, 8-11, 15-19
Y	US 6,103,519 A (COMBERBACH et al) 15 August 2000 (15.08.2000), entire reference.	2, 16
Y	US 6,221,349 B1 (COUTO et al) 24 April 2001 (24.04.2001), column 3, lines 23-30, column 6, lines 16-32, column 10, lines 11-22 and column 13, lines 1-9.	1-3, 6-10, 12-14, 17-19
Y	US 6,124,273 A (DROHAN et al) 26 September 2000 (26.09.2000), column 9, lines 7-22.	15
Y	US 6,135,942 A (LEPTIN) 24 October 2000 (24.10.2000), column 48, lines 16-35.	11

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☐ See patent family annex.

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"O" document referring to an oral disclosure, use, exhibition or other means

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"T"

later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention

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document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone

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document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art

"&"

document member of the same patent family

Date of the actual completion of the international search

18 October 2002 (18.10.2002)

Date of mailing of the international search report

18 DEC 2002

Name and mailing address of the ISA/US

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Box PCT
Washington, D.C. 20231

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